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UTILITY
PATENT APPLICATION
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(Only for new nonprovisional applications under 37 CFR 1.53 (b))

	ney Docket No.	81602/0703
First I	nventor	Zbigniew S. Piec
Title	HOMOPOLAR MA	CHINE WITH IMPROVED BRUSH LIFETIME
Expres	ss Mail Label No.	EV 322440285 US

				<u> </u>	0			
APPLICATION ELEMEN See MPEP chapter 600 concerning utility patent ap		ADDRESS TO:	Mail Stop Patent Applicat Commissioner For Patents P. O. Box 1450 Alexandria, VA 22313-145	ຸ ດ ວັ	58409			
1. X Fee Transmittal Form (e.g., PTO/SB/17 (Submit an original and a duplicate for fee processing)  Applicant claims small entity status. See 37 CFR 1.27.  Specification [Total Pages_(preferred arrangement set forth below)  - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the drawings (if filed) - Detailed Description - Claim(s) - Abstract of the disclosure  4. X Drawing(s)(35 U.S.C.113) [Total Sh 5. Oath or Declaration [Total Page a.] X Newly executed (original or copy) b. Copy from a prior application (37 CR (for continuation/divisional with Box 18 continuation/divisional with Box 18 continuation/divisional with Box 18 continuation/divisional with Box 18 continuation (1) (2) and 1.33(b).  6. Application Data Sheet. See 37 CFR 1.76	eets8] es4]  FR 1.63(d)) mpleted) S) inventor(s)	8. Nucleotide and (if applicable, a. Co b. Specification i. ii. c. Sta ACCOMP.  9. X Assignment and (when the interest in the	computer Readable Form (CR Sequence Listing on:  CD-ROM or CD-R (1)  Paper  atements verifying identity or  ANYING APPLICAT  cent Papers (cover sheet & doc  3.73(b) Statement  ere is an assignee)  Franslation Document (if appron Disclosure  t (IDS)/PTO-1449  ary Amendment  ecceipt Postcard (MPEP 503)  the specifically itemized)  Copy of Priority Document( in priority is claimed)  cation Request under 35 U.S.  (i). Applicant must attach for  (ii). Applicant must attach for  (iii). Applicant must attach for  (iiii). Applicant must attach for  (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	2 copies); or  f above copies  TON PARTS  cument(s))  Power of Attorney  olicable)  Copies of IDS  Citations	10/			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional Continuation-in-part (CIP) of prior application Nos.:  Prior application information: Examiner Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is								
considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.  19. CORRESPONDENCE ADDRESS								
	19. CURRESPU	INDENCE ADDICESS						
X Customer Number	22	242	OR X Corresponden	ace address below				

Name	JAMES J. SCHUMANN							
Address	120 S. La Salle Street, Suite 1	600						
City	Chicago	State	IL	Zip Code	60603-3406			
Country	USA	Telephone	858-552-1311	Fax	858-552-0095			
Name (Print/Type)	JAMES J. SCHUMANN		Registration No. (Att	orney/Agent)	20,856			
Signature	Ormes of	& Ohuma	ım	Date	10/10/03			

This collection of information is required by 37 CFR 1.57(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 22 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

	PTO/SB/17 (10-03) Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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## **FEE TRANSMITTAL** for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27 **TOTAL AMOUNT OF PAYMENT** (\$)810.00

	Complete if Known									
i	Application Number	TBD								
	Filing Date	October 10, 2003								
	First Named Inventor	Zbigniew S. Piec								
	Examiner Name									
_	Art Unit									
	Attorney Docket No.	81602/0703								

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Charle Condit Cond Money Other None		DITION	IAL FE Small			
Creck Credit Cald Order Out No.10	Large Fee	Fee	Fee	Fee	Fee Description	Fee Paid
X Deposit Account	Code	(\$) 130	Code 2051	(\$) 65	Surcharge - late fling fee or oath	ree raid
Deposit	1051				Surcharge - late ming lee of dath	
Account 06-1135 Number	1052	50	2052	25	cover sheet	
Deposit Account Name	1053	130	1053	130	Non-English specification	
The Director is authorized to: (check all that apply)	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
x Charge fee(s) indicated below x Credit any overpayments	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge any additional fee(s) or any underpayment of fee(s)	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
Charge fee(s) indicated below, except for the filing fee	1251	110	2251	55	Extension for reply within first month	
to the above-identified deposit account.	1252	420	2252	210	Extension for reply within second month	
FEE CALCULATION	1253	950	2253	475	Extension for reply within third month	
1. BASIC FILING FEE	1254	1,480	2254	740	Extension for reply within fourth month	
Large Entity   Small Entity	1255	2,010	2255	1,005	Extension for reply within fifth month	
Fee Fee Fee Fee Description	1401	330	2401	165	Notice of Appeal	1
Code (\$) Code (\$) Fee Paid  1001 770 2001 385 Utility filing fee 770,00	1402	330	2402	165	Filing a brief in support of an appeal	
1002 340 2002 170 Design filing fee	1403	290	2403	145	Request for oral hearing	
1003 530 2003 265 Plant filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1004 770 2004 385 Reissue filing fee	1452	110	2452	55	Petition to revive - unavoidable	
1005 160 2005 80 Provisional filing fee	1453	1,330	2453	665	Petition to revive - unintentional	
SUBTOTAL (1) (\$)770.00	1501	1,330	2501	665	Utility issue fee (or reissue)	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1502	480	2502	240	Design issue fee	
Fee from Extra Claims below Fee Paid	1503	640	2503	320	Plant issue fee	
Total Claims /8 -20**= O X =	1460	130	1460	130	Petitions to the Commissioner	
Independent 3 -3**= O X == =	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
Multiple Dependent = =	1806	180	1806	180	Submission of Information Disclosure Stmt	
Large Entity Small Entity	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	40.00
Fee Fee Code (\$) Fee Description	1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1202 18 2202 9 Claims in excess of 20			0040	205	For each additional invention to be	
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	examined (37 CFR § 1.129(b))	
1203 290 2203 145 Multiple dependent claim, if not paid  1204 86 2204 43 **Reissue independent claims over original patent	1801	770	2801	385	Request for Continued Examination (RCE)	
** Reissue claims in excess of 20	1802	900	1802	900	Request for expedited examination of a design application	1
and over original patent  SUBTOTAL (2) \$0.00		r fee (spe	cify)		or a design application	
**or number previously paid, if greater; For Reissues, see above	*Red	uced by B	asic Filir	ng Fee P	Paid SUBTOTAL (3) (\$)	40.00

SUBMITTED BY					Complete (if app	Complete (if applicable)	
Name (Print/Type)	JAMES J. SCHUMANN	77	Registration No. (Attorney/Agent)	20,856	Telephone	858-552-1311	
Signature	Harnes S		kemann		Date	10/10/03	

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